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## BIB DATA SHEET

CONFIRMATION NO. 3154

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/720,026	11/21/2003	435	1647	DX01074B1K	
<b>RULE</b>					
<b>APPLICANTS</b> Madaline Chirica, Dedham, MA; Robert A. Kastelein, Redwood City, CA; Kevin W. Moore, Palo Alto, CA; Christi L. Parham, San Francisco, CA;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/667,290 09/18/2003 which is a DIV of 09/853,180 05/10/2001 PAT 6,756,481 which claims benefit of 60/203,426 05/10/2000					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/14/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and <u>/JEGATHEESAN</u> <u>SEHARASEYON</u> Acknowledged <u>Examiner's Signature</u>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> DNAX RESEARCH INC. LEGAL DEPARTMENT 901 CALIFORNIA AVENUE PALO ALTO, CA 94304 UNITED STATES					
<b>TITLE</b> MAMMALIAN RECEPTOR PROTEIN DCRS5;METHODS OF TREATMENT					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		